

FINANCIAL AFFIDAVIT			
IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE			
IN UNITED STATES	MAGISTRATE	DISTRICT	<input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)
IN THE CASE		FOR	LOCATION NUMBER
USA V.S. <u>QUILLIN PORTER</u>		AT	
PERSON REPRESENTED (Show your full name) <div style="font-size: 1.5em; margin-top: 20px;"><u>Quinnlan Porter</u></div>		1 <input checked="" type="checkbox"/> Defendant—Adult 2 Defendant - Juvenile 3 Appellant 4 Probation Violator 5 Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other	DOCKET NUMBERS
			Magistrate 04-823-MBB District Court Court of Appeals
CHARGE/OFFENSE (describe if applicable & check <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor 18 USC 1341 and 2			

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: <u>decline to answer on advice of counsel</u> IF YES, how much do you (in custody) earn per month? \$ _____ IF NO, give month and year of last employment How much did you earn per month? \$ _____																	
		If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____																	
	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES <div style="display: flex; justify-content: space-between;"> RECEIVED SOURCES </div> <u>decline to answer on advice of counsel</u>																	
	CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>decline to answer</u>																	
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 20%; text-align: center;">VALUE</th> <th style="width: 40%; text-align: center;">DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td><u>decline to answer on advice of counsel</u></td> </tr> <tr><td> </td><td></td><td></td></tr> <tr><td> </td><td></td><td></td></tr> <tr><td> </td><td></td><td></td></tr> </tbody> </table>				VALUE	DESCRIPTION			<u>decline to answer on advice of counsel</u>									
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OBLIGATIONS & DEBTS	DEPENDENTS		MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them														
	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED		<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED														
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)		APARTMENT OR HOME:		Creditors	Total Debt	Monthly Paymt.													
		<u>in custody now and expected to remain so</u>		<u>decline to answer on advice of counsel</u>	<u>decline to answer on advice of counsel</u>	<u>decline to answer on advice of counsel</u>													

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

4/15/2004

Quinnlan PorterI state under oath that I cannot afford counsel.